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Effective on 12/08/2004. & Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/699,182
		Filing Date	November 01, 2003
		First Named Inventor	Allmendinger, Klaus K.
		Examiner Name	Larkin, Daniel S.
		Art Unit	2856
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	INN100US
TOTAL AMOUNT OF PAYMENT	(\$) 0.00		

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☒ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims 41 Extra Claims Fee (\$) Fee Paid (\$)		
41 - 20 or HP = 0 x = 0		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims 6 Extra Claims Fee (\$) Fee Paid (\$)		
5 - 3 or HP = 0 x = 0		
HP = highest number of independent claims paid for, if greater than 3.		
Multiple Dependent Claims		
Fee (\$) Fee Paid (\$)		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEES(\$)

Non-English Specification, \$130 fee (no small entity discount)

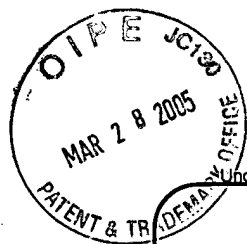
Other (e.g., late filing surcharge): _____

Fees Paid (\$)

SUBMITTED BY		
Signature	Registration No. (Attorney/Agent) 41,031	Telephone (619)271-0382
Name (Print/Type) Charles D. Gavrilovich, Jr.		Date March 25, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

12

Application Number

10/699,182

Filing Date

November 01, 2003

First Named Inventor

Allmendinger, Klaus K.

Art Unit

2856

Examiner Name

Larkin, Daniel S.

Attorney Docket Number

INN100US

ENCLOSURES (Check all that apply)

Fee Transmittal Form



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Reply to Missing Parts/
Incomplete ApplicationReply to Missing Parts
under 37 CFR 1.52 or 1.53

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a
Provisional Application

Power of Attorney, Revocation



Change of Correspondence Address



Terminal Disclaimer



Request for Refund



CD, Number of CD(s) _____

☐ Landscape Table on CD

After Allowance Communication to TC

Appeal Communication to Board
of Appeals and InterferencesAppeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(s) (please identify
below):

Itemized Postcard

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Gavrilovich, Dodd, and Lindsey, LLP

Signature

Printed name

Charles D. Gavrilovich, Jr.

Date

March 25, 2005

Reg. No.

41,031

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name

Charles D. Gavrilovich, Jr.

Date

March 25, 2005

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application
No. 10/699,182

For: SYSTEM, APPARATUS, AND
METHOD FOR MEASURING AN
OXYGEN CONCENTRATION OF A
GAS

Klaus K. Allmendinger

Examiner: Larkin, Daniel Sean

Filed: November 01, 2003

Group No. 2856

RESPONSE TO OFFICE ACTION

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Commissioner:

In response to the Office Action dated March 03, 2005 subjecting the claims to a restriction, please amend the above-identified application as indicated below.

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

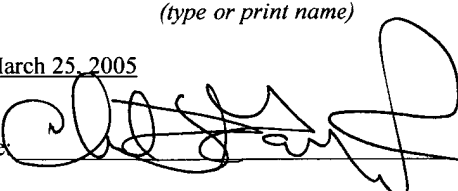
I hereby certify that this correspondence is, on the date shown below, being:

MAILING

- ☒ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: Charles D. Gavrilovich, Jr.
(type or print name)

Date: March 25, 2005

Signature: 

FACSIMILE

- ☐ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: _____
(type or print name)

Date: _____

Signature: _____